

County: Waukesha
 VIRGINIA HEALTH & REHAB CENTER
 1451 CLEVELAND AVE

Facility ID: 9180

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WAUKESHA 53188 Phone:(262) 547-2123
 Operated from 1/1 To 12/31 Days of Operation: 366
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/04): 105
 Total Licensed Bed Capacity (12/31/04): 105
 Number of Residents on 12/31/04: 98

Ownership:
 Highest Level License: Skilled
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 99

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%	
		Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		38.8	
Home Health Care	No	-----	-----	-----	-----	1 - 4 Years		40.8	
Supp. Home Care-Personal Care	No	Developmental Disabilities	0.0	Under 65	3.1	More Than 4 Years		20.4	
Supp. Home Care-Household Services	No	Mental Illness (Org./Psy)	2.0	65 - 74	3.1			-----	
Day Services	No	Mental Illness (Other)	0.0	75 - 84	34.7			100.0	
Respite Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	48.0	*****			
Adult Day Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.2	Full-Time Equivalent			
Adult Day Health Care	No	Cancer	1.0		-----	Nursing Staff per 100 Residents			
Congregate Meals	No	Fractures	0.0		100.0	(12/31/04)			
Home Delivered Meals	No	Cardiovascular	61.2	65 & Over	96.9	-----			
Other Meals	No	Cerebrovascular	11.2		-----	RNs		11.7	
Transportation	No	Diabetes	2.0	Gender	%	LPNs		8.5	
Referral Service	No	Respiratory	2.0	-----	-----	Nursing Assistants,			
Other Services	No	Other Medical Conditions	20.4	Male	21.4	Aides, & Orderlies			
Provide Day Programming for		-----	-----	Female	78.6	40.7			
Mentally Ill	No		100.0		-----				
Provide Day Programming for					100.0				
Developmentally Disabled	No				100.0				

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care							
		No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	Total Resi- dents	% Of All
Level of Care																			
Int. Skilled Care	0	0.0	0	2	3.0	144	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	2.0
Skilled Care	10	100.0	352	63	95.5	122	0	0.0	0	21	100.0	180	0	0.0	0	1	100.0	397	96.9
Intermediate	---	---	---	1	1.5	101	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	1	1.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	10	100.0		66	100.0		0	0.0		21	100.0		0	0.0		1	100.0	98	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	7.1	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.6	Bathing	0.0	77.6	22.4	98
Other Nursing Homes	3.9	Dressing	19.4	59.2	21.4	98
Acute Care Hospitals	85.7	Transferring	43.9	38.8	17.3	98
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	34.7	52.0	13.3	98
Rehabilitation Hospitals	0.0	Eating	78.6	11.2	10.2	98
Other Locations	2.6	*****				
Total Number of Admissions	154	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	4.1		Receiving Respiratory Care	16.3
Private Home/No Home Health	6.3	Occ/Freq. Incontinent of Bladder	37.8		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	28.5	Occ/Freq. Incontinent of Bowel	28.6		Receiving Suctioning	0.0
Other Nursing Homes	2.5				Receiving Ostomy Care	3.1
Acute Care Hospitals	17.1	Mobility			Receiving Tube Feeding	2.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	37.8
Rehabilitation Hospitals	0.0					
Other Locations	12.7	Skin Care			Other Resident Characteristics	
Deaths	32.9	With Pressure Sores	4.1		Have Advance Directives	31.6
Total Number of Discharges		With Rashes	7.1		Medications	
(Including Deaths)	158				Receiving Psychoactive Drugs	10.2

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.3	86.4	1.09	86.5	1.09	87.3	1.08	88.8	1.06
Current Residents from In-County	86.7	85.0	1.02	87.0	1.00	85.8	1.01	77.4	1.12
Admissions from In-County, Still Residing	21.4	18.1	1.19	18.9	1.13	20.1	1.07	19.4	1.10
Admissions/Average Daily Census	155.6	199.9	0.78	188.2	0.83	173.5	0.90	146.5	1.06
Discharges/Average Daily Census	159.6	201.1	0.79	190.4	0.84	174.4	0.92	148.0	1.08
Discharges To Private Residence/Average Daily Census	55.6	83.1	0.67	77.5	0.72	70.3	0.79	66.9	0.83
Residents Receiving Skilled Care	99.0	95.8	1.03	95.9	1.03	95.8	1.03	89.9	1.10
Residents Aged 65 and Older	96.9	84.4	1.15	90.5	1.07	90.7	1.07	87.9	1.10
Title 19 (Medicaid) Funded Residents	67.3	61.2	1.10	56.3	1.20	56.7	1.19	66.1	1.02
Private Pay Funded Residents	21.4	13.7	1.56	22.2	0.97	23.3	0.92	20.6	1.04
Developmentally Disabled Residents	0.0	1.2	0.00	1.1	0.00	0.9	0.00	6.0	0.00
Mentally Ill Residents	2.0	30.0	0.07	29.0	0.07	32.5	0.06	33.6	0.06
General Medical Service Residents	20.4	23.2	0.88	25.4	0.80	24.0	0.85	21.1	0.97
Impaired ADL (Mean)	41.0	52.9	0.78	52.6	0.78	51.7	0.79	49.4	0.83
Psychological Problems	10.2	51.7	0.20	55.4	0.18	56.2	0.18	57.7	0.18
Nursing Care Required (Mean)	8.8	8.4	1.05	7.7	1.15	7.7	1.14	7.4	1.18